SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Bayfield Co. Zonling Dept. AUG 01 2014

> Refund: Permit #: Amount がどの

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

TYPE OF PERMIT REQUESTED-		K LAND USE □ SANIT	□ SANITARY □ PRIVY □	CONDITIONA	☐ CONDITIONAL USE ☐ SPECIAL	AL USE	□ в.о.	OTHER
Owner's Name:			man, manufacturents	NO P	city/state/zip: Augqstq/	Fr En	722	Telephone: 715
Z ivi			/State/Zip:	H				Cell Phone:
	l l			2	Z 7 T T T T T T T T T T T T T T T T T T			Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	gning Application or	S S	Agent Phone: A	gent Mailing Adı	<u> </u>	tate/Zip)		Written Authorization Attached Yes KNo
PROJECT LERG	Legal Description:	(Use Tax Statement) PI	PIN: (23 digits) 04-0/8-よ-44-67	9-4	02-600-10000 Volume -	Records Volume	Document:	corded Document: (i.e. Property Ownership) lume 1128 Page(s) 823
2 NW 1/4, SE	1/4	Gov't Lot Lot(s)	CSM Vol & Page	Lot(s) No.		Subdivision:	sion:	to de laboratoria.
section 20	, Township 44	N, Range 7 W	Town	of:		Lot Size		Acreage 20
□ Is	Property/Land ek or Landward	Is Property/Land within 300 feet of River, Stream (Incl. Intermittent) Creek or Landward side of Floodplain? If yescontinue —▶	Stream (Incl. Intermittent) If yescontinue	Distance Structure	cture is from Shorelin	eline :	Is Property in Floodplain Zone?	rty in Are Wetlands
☐ Shoreland —► ☐ Is	Property/Land	Lake,	Pond or Flowage If yescontinue	Distance Structure	cture is from Shorelin	eline : feet	□ Yes	
▼ Non-Shoreland		45						
Value at Time of Completion * include donated time & (What	Project t are you applying for)	# of Stories and/or basement	nt Use	# of bedrooms	W Sewer/ Is on		hat Type of Sanitary System the property?	Water
	New Construction Addition / Alteration	on	☐ Seasonal ** Year Round	_ 1 _ 2	☐ Municipal/City > (New) Sanitary	- I	Specify Type: Con	ON U Xwell
3000 PH 8	Conversion			w		<u>``</u>	Specify Type:	- Annual Property of the Control of
- R- 13	siness		I	X None	☐ Portable (w/service contract)	/service	e contract)	
	Property				□ None			
Existing Structure: (If permit being applied for is relevant to it) Proposed Construction:	ermit being app	lied for is relevant to it)	Length:	Y	Width:	HO.	Height: Height:	Height:
Proposed Use			Proposed Structure	76			Dimensions	Square S Footage
Anni de Printe de la Constantina del Constantina de la Constantina del Constantina de la Constantina d		Principal Structure (first structure on property)	tructure on property)	1 Hod	plda.	-	20×40	2,000
	Kesi	with Loft	ilig slidck, etc.)	and the second	t (All things plants) and a second		×	
X Residential Use		with a Porch			H	-	< ×	Villa III I
		with a Deck	A CONTRACTOR OF THE CONTRACTOR				×	
Commorcial lice		with (2 ^{na}) Deck				~	××	
	Bun	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters,	or □ sleeping quarters,	<u>or</u> □ cooking &	k food prep facilities)	-	×	
			d date)		The second secon	_ '_	×	
☐ Municipal Use	□ Acc	Accessory Building (specify)	ify)		A SA CASA SA C	<u>~</u>	×	
		ا≲ا	on/Alteration (specify)				×)
Rec'd for Issuance	Spe	Special Use: (explain)	. mm.mm.m.	Lie (Lie O)	· · · · · · · · · · · · · · · · · · ·	+	×	
h .b.		Conditional Use: (explain)					×	
200		Other: (explain)		The state of the s			×	,

Owner(s): X PM LELL J A DAM (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the

er(s) a letter

pany this application)

Date

7-31-14

Attach
Copy of Tax Statement V
thy purchased the property send your Recorded Deed

ter of authorizati

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MIKE

Address to send permit 9 \ VC

Date of Approva	Date of Approx	tucture.		is fritures.	Shimplung	Structure. Mr. p. Signature of Inspector. Monday.	Signature o
3	pressure in	e under	hey need to be :	IN JOHN	Conditions Attached?	s):Town, Committee or Boar . Mother used	Condition(s):Town,
tion:	Zoning District (Lakes Classification (Date of Re-Inspection		tutele	Inspected by:	of bucks.	Metallse Metallse pection: 8-8-14	Inspection Record:
□ No	d XYes	Were Property Lines Represented by Owner Was Property Surveyed	Were Property Li		d Xyes □No	Was Parcel Legally Created Was Proposed Building Site Delineated	Was Pro
	Case #:	Previously Granted by Variance (8.0.A.) □ Yes X No Ca	Previously Granted □ Yes X No			Granted by Variance (B.O.A.) □ Yes 义No Case #:	Granted by V
□ Yes X No □ Yes X No	Affidavit Required Affidavit Attached	d Yes XNo	Mitigation Required Mitigation Attached	us Lot(s)) K No	es (Deed of Record) es (Fused/Contiguous Lot(s)) es	Is Parcel a Sub-Standard Lot Pes Is Parcel in Common Ownership Pes Is Structure Non-Conforming Pes	Is Pai Is Parcel Is Stru
			14	Permit Date: 8-//-		14 COO	Permit #:
	Sanitary Date:	# of bedrooms:		Sanitary Number: Reason for Denial:	Jse Only)	Issuance Information (County Use Only) Permit Denied (Date):	Issuance Permit De
d <u>Well</u> (W).	ank (HT), Privy (P), and s not begun. Iform Dwelling Code.	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W) NOTICE: All land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	n the Date of Issuance Municipalities Are Re Federal agencies may	s) of New Construction Expire One (1) Year from vo Family Dwelling: ALL n, Village, City, State or	posed Location(Land Use Permits Of New One & To The local Tov	(9) Stake or Mark Pro NOTICE: Al For The Constructio	
I must be visible from cture, or must be	the setback must be measured of the proposed site of the stru	ack, the boundary line from which t m a known corner within 500 feet c	the minimum required setb	er's expense. ut less than thirty (30) feet from thisble by the Department by us	ised surveyor at the own more than ten (10) feet h ly surveyed corner, or ve	other previously surveyed corner or marked by a licensed surveyor at the owner's expense. Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feat from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.	other previous Prior to the plone previously marked by a li
ously surveyed corner to the	one previ	dary line from which the setback must be measured must be visible from	e boundary line from which ti	Feet Feet minimum required setback, the	ng)	Set back to Privy (Portable, Composting) Prior to the placement or construction of a structure within ten (10) feet of the	Setback to
NII Feet			Setback to Well		nk	Setback to Septic Tank or Holding Tank	Setback to
Why Feet		0% Slope Area odplain	Setback from 20% Slope Area Elevation of Floodplain	Feet Feet	lawn Rd	1	Setback f
		/etland	Setback from W	300 Feet		Setback from the North Lot Line Setback from the South Lot Line	Setback f
Teet WH Feet WH Feet		Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	Setback from th Setback from th	(200 ← Feet	d Road f-Way	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Setback f
Measurement	N	Description		Measurement		Description	
ng & Zoning D	pproved by the Plannii	Changes in plans must be approved by the Planning & Zoning Dept.		point)	ed to the closest	tbacks: (measu	+ 1 A C C C C C C C C C C C C C C C C C C
		,			(prior to continuing)	complete (1) - (7) above (Please
		(tachment	See atte	(\(\sigma^2\)		
			·				
,	nd/or (*) Privy (P)	Proposed Construction North (N) on Plot Plan North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or ((*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	ad (Name Frontage F pperty (*) Drain Field (DF); ek; or (*) Pond	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Ro. All Existing Structures on your Pro (*) Well (W); (*) Septic Tank (ST); (*) Well (W); (*) Stream/Cre (*) Lake; (*) River; (*) Stream/Cre	Proposed (North (N) (*) Drivew: All Existing (*) Well (N (*) Lake; (*) (*) Wetlan	(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):	
· •			e applying for)	ardless of what you ar	our Property (reg	box below. Draw or Sketch your Property (regardless of what you are applying for)	3.6

®®January 2012

Town of Drummand County of Bay Providence 600x 3004 Home 2500,sq P 600+ 40' 660 N. Pine Rock Rd

SUBMIT: COMPLETED APPLICATION, TAX Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Day Starting (Regerves) 制8052014 Zerfromameur Partheomolesco m

THE Permit #: Date: Amount Paid: 20,8 20,8 44,00 44

I.

8-6-14

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Depi

	(/2	demissable by the property of	And Antibulative F		Special Use: (explain)	Special Us		
			in Artifacture (*)	and the second s				
	1 /2							Hec a lot issuative
	1 /2	AMANA BANKANA TANA	Additional of the last of the	Iteration (specify	Accessory Building Addition/Alteration (specify)	Accessory	anca	חסיא למד ופפוני
	~ :	CAMport Cousts.	Steel	wood Shed-	Accessory Building (specify)	Accessory	:"\	☐ Municipal Use
					Addition/Alteration (specify)	Addition/		
	ı X			te)	Mobile Home (manufactured date)	Mobile H		
	~ ×	sleeping quarters, or a cooking & food prep facilities)	or □ cooking	sleeping quarters,	Bunkhouse w/ (□ sanitary, or □	Bunkhous		
				age	with Attached Garage		Use	Commercial Use
	(X				with (2 nd) Deck			
	(×				with a Deck			
	(×				with (2 nd) Porch			,
· 	()				with a Porch		Jse	Residential Use
	~ ~			hack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence		
	×		transport of the state of the s	ure on property)	Principal Structure (first structure on property)	Principal :		
imensions Square Footage	Dimen		re	Proposed Structure			· ·	Proposed Use
Height: 6 JANIS-9 + Police	12	width:		Length: 3			ction:	Proposed Construction:
Height:		Width:		Length:	(if permit being applied for is relevant to it)	ing applied fo	: (if permit be	Existing Structure:
		a and the second	,	The second secon	- Gravel BASE	hed	□ Wood Shed	1
	let	☐ Compost Toilet					Property	Ţ.
	service contract)	☐ Portable (w/service co	None Non		1 1	siness on	☐ Run a Business on	
Vaulted (min 200 gallon)	or Vaulted	Privy (Pit)			□ Basement	(existing bldg)	Relocate (existing bldg)	
Sanitary (Exists) Specify Type: Orning is a	sts) Specify Ty		1			on	☐ Conversion	\$ 2000 CF
)e:	Iry Specify Type:	□ (New) Sanitary	□ 2	Year Round	☐ 1-Story + Loft	Alteration	☐ Addition/Alteration	
	ity	☐ Municipal/City	1	□ Seasonal	☐ 1-Story	struction	New Construction	alcia
stem y?	What Type of Sewer/Sanitary System is on the property?	Sewe	# of bedrooms	Use	# of Stories and/or basement	ect	Project	Value at Time of Completion * include donated time &
			-				H Sarch (180) (Sarch (180) (Sar	
No	*	ucture is from Shoreline : fee	Distance Structure	Pond or Flowage If yescontinue	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage	y/Land within	☐ Is Proper	
Is Property in Are Wetlands Floodplain Zone? Present?		ucture is from Shoreline :	Distance Structure	am (incl. Intermittent)	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? NO If yes—continue —▶	ry/Land within	☐ Is Proper Creek or La	0 0 0 0 0 0 0 0 0 0 0
ters 4.51		, , , , , , , , , , , , , , , , , , , ,	n m m d	023		, Township 1 44 N, Range	Townsh	Section
Acreage	Lot Size			3 28 Town of:	3		1/4	2 2 1/4,
	Subdivision:	Block(s) No.	Lot(s) No.	GSM WO & Page	Lot(s)	Gov't Lot		0
Page(s) 363	Recorded Docum	0000 pr 200	-31-305"	PIN: (23 digits) 04- ひ・8 - 2 - サ	(Use Tax Statement) PIN: (2		Legal Description:	PROJECT LOCATION
Written Authorization Attached □ Yes Z^No		Agent Mailing Address (include City/State/Zip):	lgent Mailing A	Agent Phone:		lication on behalf	erson Signing App	Authorized Agent: (Person Signing Application on behalf of Owner(s))
Plumber Phone:	į		Plumber:		Contra			475
		832	11:548	Diaman 1. C		2	AKS I	Z) 64
	W. 54832	Droamand,	Rd	3260 Tri CAKES		S. NeLSON	* MAry S.	
Telephone:		City/State/Zip:	City	Mailing Address:				Owner's Name:

all by it Attach
Copy of Tax Statement Copy of Tax Statement If you recently purchased the property send your Recorded Deed Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Same

S S

Owner(s): albert

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)elson

Deed All Owners

ust sign or letter(s) of aut

Ithorization must accompany this application)

Date

Date

128

(If there are Multiple Owners listed on the

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Am (are) responsible for the detail and accuracy of all information is (we) and (ree) providing and the lief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield country in depending on this information I (we) am (are) providing and that it will be relied upon by Bayfield country in depending whether to issue a permit. I (we) further accept liability which may be a result of Bayfield Country relying on this information I (we) am (are) providing in or with this application. I (we) consent to country officials charged with administering country ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Sanitary Number: Sanitary Number: Sanitary Number: Sanitary Number: Permit #: 14	Please complete (1) – (7) above (prior to continuing) (8) Setbacks: (measured to the closest point) Description Descrip	(1) Show Location of: Proposed Construction (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Front All Existing Structures on your Property (5) Show: (*) Weil (W); (*) Septic Tank (ST); (*) Drain Field (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20% (*) (*) Wetlands; or (*) Slopes over 20% (*) (*) Wetlands; or (*) Slopes over 20% (*)
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits. Sanitary Number: # of bedrooms: Sanitary Date:	Changes in plans must be approved by the Planning & Zoning Dept. Description Description Measurement Feet Setback from the Lake (ordinary high-water mark) Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff Feet Setback from Wetland Feet Setback from Wetland Feet Elevation of Floodplain Feet Feet Setback to Well Feet Feet Setback from which the setback must be measured must be visible from one previously surveyed corner to the setback, the boundary line from which the setback must be measured must be visible from ment by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be structure. Setback from a known corner within 500 feet of the proposed site of the structure, or must be structure, or must be structure. Setback from the minimum required setback must be measured must be visible from ment by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be structure. Setback from the minimum required setback must be measured must be visible from ment by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be structure. Setback from the minimum required setback must be measured must be visible from ment by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be structure.	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (N); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20% (A) (*) Wetlands; or (*) Slopes over 20% (A) (*) Wetlands; or (*) Slopes over 20% (A)